510(k) Summary of Safety and Effectiveness

Submitter Information

Contact person: George M. Tancos

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Date Prepared: November 30, 2004

Device Information

Proprietary Name: Ascensia ELITE™ Blood Glucose Meter

Common Name: Blood Glucose Meter

Classification: Division of clinical laboratory Devices Panel --- Clinical Chemistry

and Toxicology classification Code 75 CGA (Glucose Oxidase,

Glucose)

Predicate Device Information

Name: Ascensia ELITETM Blood Glucose Meter

Manufacturer: Bayer HealthCare LLC

430 S. Bieger Street Mishawaka, In 46544

510(k) Number(s): K020208/K964630

Device Description

The Ascensia ELITE™ Diabetes Care System consists of an electrochemical method-based meter and dry reagent sensor (test strips) designed for testing glucose by persons with diabetes or by healthcare professionals in the home or in healthcare facilities.

Statement of Intended Use:

The Ascensia ELITE™ Diabetes Care System is for the Self-Monitoring of Blood Glucose as an adjunct to the care of person with diabetes.¹

Summary of Technological Characteristics:

The Ascensia ELITE™ Diabetes Care System is based on an electrode sensor technology. Capillary action at the end of the Test Strip draws a small amount of blood into the reaction chamber and a reading is displayed in 30 seconds. The Test Strips are foiled and available in packages of 25, 50, or 100 counts. Blood glucose results are referenced to plasma glucose. The System has a linear response to glucose from 20-600 mg/dL.

Performance Data:

An evaluation of the Ascensia ELITETM Diabetes Care System was studied to verify and validate that the microprocessor change did not adversely affect or change the performance characteristics of the system. These studies demonstrated that users can obtain blood glucose results that are substantially equivalent to current methods for blood glucose.

Conclusion:

The results of verification and validation evaluations of the Ascensia ELITETM Diabetes Care System demonstrate that the device is equivalent in performance to the predicate device and suitable of its intended use.

¹ "Consensus Statement on Self-Monitoring of Blood Glucose," <u>Diabetes Care</u>, Vol. 10, No. 1, January-February 1987, pp. 95.99





Food and Drug Administration 2098 Gaither Road Rockville MD 20850

DEC 2 2 2004

Mr. George M. Tancos Manager, Regulatory Affairs Bayer HealthCare LLC Diabetes Care Division 1884 Miles Avenue, PO Box 70 Elkhart, IN 46514-0070

Re: k043311

Trade/Device Name: Ascensia ELITE™ Diabetes Care System

Regulation Number: 21 CFR 862.1345 Regulation Name: Glucose test system

Regulatory Class: Class II Product Code: NBW, CGA Dated: November 30, 2004 Received: December 1, 2004

Dear Mr. Tancos:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820).

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific information about the application of labeling requirements to your device, or questions on the promotion and advertising of your device, please contact the Office of In Vitro Diagnostic Device Evaluation and Safety at (301) 594-3084. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html.

Sincerely yours,

Cornelia B. Rooks, MA

Acting Director

Division of Chemistry and Toxicology

Office of In Vitro Diagnostic Device

Evaluation and Safety

Center for Devices and Radiological Health

Enclosure

510(k) Number (if known): <u>K043311</u> Ascensia ELITETM Diabetes Care System **Device Name:** The Ascensia ELITETM Blood Glucose Meter is used **Indications for Use:** with Ascensia ELITE™ Blood Glucose Test Strips, and Ascensia ELITETM Controls for the measurement of glucose in whole blood from specimens taken from the fingers or an alternate puncture site within certain conditions. The Ascensia ELITE™ Diabetes Care System is an Over-The-Counter (OTC) device used by persons with diabetes and by healthcare professionals in home settings and in healthcare facilities. The frequent monitoring of blood glucose is an adjunct to the care of persons with diabetes. Over-The-Counter Use -XX-AND/OR Prescription Use (21 CFR 807 Subpart C) (Part 21 CFR 801 Subpart D) (PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE

Concurrence of CDRH, Office of In Vitro Diagnostic Devices (OIVD)

Coul C. Berson Division Sign-Off

IF NEEDED)

Office of In Vitro Diagnostic

Device Evaluation and Safety

510(K) K043311